2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2008
Secretary of State

DOCUMENT# F02000003817

Entity Name: HOME MORTGAGE ASSURED CORPORATION

Current Principal Place of Business:

4141 ROCKSIDE RD.
SEVEN HILLS, OH 44131

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 318099
CLEVELAND, OH 441318099

New Mailing Address:

FEI Number: 34-1632542 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LATORE, DONALD A
1305 CHESAPEAKE AVE
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	C	( ) Delete
Name:	HANNA, HOWARD W III	
Address:	119 GAMMA DRIVE	
City-St-Zip:	PITTSBURGH, PA 15238	
Title:	P	( ) Delete
Name:	LATORE, DONALD A	
Address:	35295 MILES RD	
City-St-Zip:	MORELAND HILLS, OH 44022	
Title:	VP	( ) Delete
Name:	STEELE, MARK D	
Address:	119 GAMMA DRIVE	
City-St-Zip:	PITTSBURGH, PA 15238	
Title:	SEC	( ) Delete
Name:	HANNA-CESTRA, ANNIE	
Address:	119 GAMMA DRIVE	
City-St-Zip:	PITTSBURGH, PA 15238	
Title:	TREA	( ) Delete
Name:	LLOYD, DAVID F	
Address:	119 GAMMA DRIVE	
City-St-Zip:	PITTSBURGH, PA 15238	
Title:	ASEC	( ) Delete
Name:	CORSI, ALFRED R JR.	
Address:	4141 ROCKSIDE ROAD	
City-St-Zip:	SEVEN HILLS, OH 44131	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD A. LATORE PRES 01/18/2008

Electronic Signature of Signing Officer or Director Date